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APPLICANTS
 Bradley M. Wilkinson, North Haledon, NJ;
 Charles Hwang, Ridgewood, NJ;
 Anthony J. Kosinski, New Providence, NJ;
 Simon Cohn, North Arlington, NJ;
 Ann C. Eckert, Easton, PA;
 Noel Gharibian, Glendale, CA;

**** CONTINUING DATA *******
 This application is a REI of 09/273,677 03/22/1999 PAT 6,053,929
 which is a CIP of 09/052,588 03/31/1998 PAT 5,938,676 KCS 4/19/2010
 which is a CIP of 08/666,734 06/18/1996 PAT 5,938,675
 which is a CIP of 08/376,065 01/20/1995 PAT 5,527,329
 which is a CON of 08/163,938 12/08/1993 ABN

**** FOREIGN APPLICATIONS ******* none KCS 4/19/2010

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****
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35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Verified and /KATHLEEN C SONNETT/ Examiner's Signature	Initials				
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ADDRESS
 David W. Highet, VP & Chief IP Counsel
 Becton, Dickinson and Company
 1 Becton Drive
 MC 110
 Franklin Lakes, NJ 07417-1880
 UNITED STATES

TITLE
 Surgical scalpel

FILING FEE RECEIVED 2604	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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